

**FEC  
FORM 3**

**REPORT OF RECEIPTS  
AND DISBURSEMENTS**  
For An Authorized Committee

SECRETARY OF THE SENATE

15 MAY 19 04 PM 2:58

1. NAME OF COMMITTEE (in full) TYPE OR PRINT ▼ Example: If typing, type over the lines. 12FE4M5

CARL SMINK FOR U.S. SENATE

ADDRESS (number and street) ▼

30428 HOLLY RUN

Check if different than previously reported. (ACC)

MILTON

DE

19968-3425

2. FEC IDENTIFICATION NUMBER ▼

C00568329

3. IS THIS REPORT

NEW (N)

OR

X

AMENDED (A)

ZIP CODE ▲

STATE ▼ DISTRICT

DE

4. TYPE OF REPORT (Choose One)

(a) Quarterly Reports:

April 15 Quarterly Report (Q1)

July 15 Quarterly Report (Q2)

October 15 Quarterly Report (Q3)

X

January 31 Year-End Report (YE)

Termination Report (TER)

(b) 12-Day PRE-Election Report for the:

Primary (12P)

General (12G)

Runoff (12R)

Convention (12C)

Special (12S)

Election on

in the State of

(c) 30-Day POST-Election Report for the:

General (30G)

Runoff (30R)

Special (30S)

Election on

in the State of

5. Covering Period

11 25 2014

through

01 31 2015

I certify that I have examined this Report and to the best of my knowledge and belief it is true, correct and complete.

Type or Print Name of Treasurer

CARL R. SMINK

Signature of Treasurer

Carl R. Smink

Date

05 14 2015

NOTE: Submission of false, erroneous, or incomplete information may subject the person signing this Report to the penalties of 2 U.S.C. §437g.

Office  
Use  
Only

**FEC FORM 3**  
(Revised 02/2003)